

## **CERTIFICATE OF ELECTRONIC TRANSMISSION**

I hereby certify that this correspondence for Application No. 10/620,932 is being electronically transmitted to Technology Center 3734, via EFS-WEB, on September 4, 2007

/Kevin G. Rooney/  
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September 4, 2007  
Date

**PATENT**

## **IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Lawrence M. Lubbers et al.  
Serial No.: 10/620,932  
Filed: July 16, 2003  
Examiner: Michael G. Mendoza  
Group Art Unit: 3734  
Confirmation No.: 8887  
For: APPARATUS AND METHODS FOR SECURING TENDONS OR  
LIGAMENTS TO BONE  
Atty. Docket No.: TTL-04B

Cincinnati, Ohio 45202

September 4, 2007

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## **AMENDMENT TRANSMITTAL**

1. Transmitted herewith is an amendment for this application.
2.   X   Small Entity status is claimed.  
       Other than a Small Entity.
3. The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	16	MINUS	14	= 0	x \$25	\$0	x \$50	\$0
INDEP.	4	MINUS	3	= 0	x \$100	\$0	x \$200	\$100
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+\$135	\$0	+\$270	\$0
TOTALS					TOTAL FEE	\$	TOTAL FEE	\$100

- ☐ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ☐ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- ☐ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

\_\_\_ No additional fee for claims is required.

4. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

- (a)   X   Applicants petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
___ one month	\$ 120.00	\$ 60.00
<u>  X  </u> two months	\$ 450.00	\$225.00
___ three months	\$1,020.00	\$510.00
___ four months	\$1,590.00	\$795.00

(Check and complete the next item, if applicable)

\_\_\_ An extension for \_\_\_ months has already been secured and the fee paid thereof of \$\_\_\_ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$\_\_\_.

**OR**

(b)\_\_\_ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

5. Fee Payment

☒ **See electronic fee calculation sheet.**

☐ Charge extension fee of \$\_\_\_\_\_ to Deposit Account No. 23-3000.

☒ Charge any additional extension fee required or credit any overpayment to Deposit Account No. 23-3000.

Respectfully submitted,

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